



HAWAII STATE ETHICS COMMISSION ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

(To be filed by organizations, employing organizations and individuals
other than registered lobbyists)

FORM ORG

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HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
STATE ETHICS COMMISSION
RECEIVED
MAY 31 2:48 PM '05

For lobbying reporting period:

☐ January 1 - last day of February

☒ March 1 - April 30

☐ May 1 - December 31

Year of Report 20 05

Contact person

LAURE DILLON

Phone

808-384-4202

Organization

HAWAII CLEAN ELECTIONS

Mailing Address

2345 ALA WAI BLVD, #2315

HONOLULU, HI 96815

Office 1040 RICHARDS ST, #305, HONOLULU HI 96813

PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement
period was: \$ _____

EXPENDITURES

Category	Total Amount	Category	Total Amount
1. Preparation & distribution of lobbying materials	300.-	7. Entertainment	
2. Media advertising	0	8. Food & beverages	
3. Telegraph, telephone and other forms of telecommunication	100.-	9. Gifts	
4. Postage		10. Loans	
5. Compensation paid to lobbyists	6700.-	11. Other disbursements	400.-
6. Fees (other than to lobbyists)		website @ \$200.00	
		TOTAL EXPENDITURES	\$ 7500.-

COMPENSATION PAID TO LOBBYISTS

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

Name	Address	Compensation paid
LAURE DILLON	2345 ALA WAI BLVD, #2315 HONOLULU, HI 96815	3000.-
JESSICA WISNIEWSKI	2214-A CALIFORNIA AVE WAIHANA, HI 96786	3000.-
IAN KEALI CUSTINO	2845 WAIALAE AVE #200 HONOLULU, HI 96816	700.-

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

Name & Address	Amount or value

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

Name & Address	Amount or value

PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

☐ This section is not applicable

☒ Contributions received in the total sum of \$25 or more per person were received from the following persons:

Name & Address	Amount or value
1. POHAKU FUND P.O. Box 127, KENTFIELD, CA. 94014	\$ 3000
2. PIPER / PROTEUS FUND 264 NO. PLEASANT ST. 2nd. FLOOR AMHERST, MA 01002	4500.

PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input checked="" type="checkbox"/> Other: (indicate below)
<u>ELECTIONS; CAMPAIGN</u>
<u>FINANCE REFORM</u> |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

I hereby certify that the statements made above are correct and complete to the best of my knowledge

Laure Dillon

(Signature of authorized person)

May 31, 2005

(Date)

Name of authorized person (type or print) LAURE DILLON
Title of authorized person EXECUTIVE DIRECTOR